



Department of Veterans Affairs

STATE HOME INSPECTION
STANDARDS-DOMICILIARY

NAME OF FACILITY

STREET ADDRESS

CITY

COUNTRY

STATE

ZIP CODE

NORFOLK STATE VETERAN'S HOME

600 EAST BENJAMIN AVE

NORFOLK

MADISON

NE

68702

SURVEY BY (VIA FIELD ACTIVITY OR JURISDICTION)

INITIAL SURVEY

RE-SURVEY

DATE SURVEYED

REPORTS CONTROL

March 31, 2007

SURVEYORS NAME/SIGNATURE AND CORRESPONDENCE SYMBOL

1. KAY STOFER, LCSW	6. <i>Kay Stofer</i>	11. <i>Colleen Donovan</i>
2. LINDA OLIVER, RN	7. <i>Linda Oliver</i>	12. COLLEEN DONOVAN, RN
3. JULIE NITSCH, RHIA	8. <i>Julie Nitsch</i>	LEGEND
4. BRENDA SCHMIDT, RD	9. <i>Brenda Schmidt</i>	S - Substantially Met
5. William T. Foster, Auditor	10. <i>William T. Foster</i>	P - Partially Met
		N - Not Met
		NA - Not Applicable

C. STANDARDS FOR DOMICILIARY CARE

CHOOSE ONE

EXPLANATORY STATEMENTS

1. Governance and Administration: The facility is governed and managed effectively.

(A) The facility has a governing body, or designated persons so functioning, with full legal authority and responsibility for the operation of the facility.	(S) Substantially Met	
(B) Written administrative policies, procedures, and controls are established, implemented and reviewed at least annually to promote the orderly and efficient management of the facility.	(S) Substantially Met	
(C) There are sufficient, knowledgeable administrative and clinical staff assigned to provide quality care within the domiciliary.	(S) Substantially Met	

Department of Veterans Affairs		STATE HOME INSPECTION STANDARDS-DOMICILIARY		INITIAL SURVEY	RE-SURVEY	DATE SURVEYED	REPORTS CONTROL
NAME OF FACILITY		STREET ADDRESS		CITY	COUNTRY	STATE	ZIP CODE
NORFOLK STATE VETERAN'S HOME		600 EAST BENJAMIN AVE		NORFOLK	MADISON	NE	68702
KEY BY (MVA FIELD ACTIVITY OR JURISDICTION)							
SURVEYORS NAME/SIGNATURE AND CORRESPONDENCE SYMBOL							
KAY STOFER, LCSW	<i>Kay Stofer</i>	⁶	ROBERT BURNMASTER, Safety Engineer	<i>Robert Burnmaster</i>	¹¹	COLLEEN DONOVAN, RN	
LINDA OLIVER, RN	<i>Linda Oliver</i>	⁷	COLLEEN NIELSEN, RN	<i>Colleen Nielsen</i>			
JULIE NITSCH, RHIA	<i>Julie Nitsch</i>	⁸	AMY THOMPSON, PharmD	<i>Amy Thompson</i>			
BRENDA SCHMIDT, RN	<i>Brenda Schmidt</i>	⁹					
WILLIAM T. FOSTER, Auditor	<i>William T. Foster</i>	¹⁰					
C. STANDARDS FOR DOMICILIARY CARE	CHOOSE ONE	EXPLANATORY STATEMENTS					
Governance and Administration: The facility is governed and managed effectively.							
1) The facility has a governing body, or designated persons so including, with full legal authority and responsibility for the operation of the facility.	(S) Substantially Met						
2) Written administrative policies, procedures, and controls are established, implemented and reviewed at least annually to provide the orderly and efficient management of the facility.	(S) Substantially Met						
3) There are sufficient, knowledgeable administrative and clinical staff assigned to provide quality care within the facility.	(S) Substantially Met						

(D) Written personnel policies and procedures are established and implemented to facilitate sound patient care and personnel policies.	<u>(S) Substantially Met</u> S P N NA	
(E) The facility has an ongoing staff development program including orientation of new employees and in-service education related to the needs and care of domiciliary patients.	<u>(S) Substantially Met</u> S P N NA	
(F) There is evidence of input from all services to management by regular meetings and systematic review of the domiciliary program.	<u>(S) Substantially Met</u> S P N NA	

2. Safety: The facility shall be structurally safe and maintained to protect the health and safety of patients, personnel and visitors.

(A) The facility has a current State Fire Marshall's certificate or documented evidence of compliance with life safety codes.	<u>(S) Substantially Met</u> S P N NA	
(B) The facility has a current report by a qualified VA Life Safety engineer or specialist that the facility is in compliance with the provisions of the Life Safety Code currently in force, applicable to domiciliaries.	<u>(S) Substantially Met</u> S P N NA	
(C) There is evidence that reported life safety deficiencies have been or are being corrected.	<u>(S) Substantially Met</u> S P N NA	
(D) The facility has available an emergency service of electrical power to provide essential service when the normal electrical supply is interrupted.	<u>(S) Substantially Met</u> S P N NA	

(E) The buildings are accessible to and safe for persons with handicaps.	<u>(S) Substantially Met</u> S P N NA	
(F) The facility has a program for prevention and control of infection.	<u>(S) Substantially Met</u> S P N NA	
(G) Linens are handled, stored, processed, and transported in such a manner as to maintain a clean environment and prevent infection.	<u>(S) Substantially Met</u> S P N NA	
(H) The facility has an ongoing program of integrated pest management.	<u>(S) Substantially Met</u> S P N NA	
(I) Cleaning agents, maintenance supplies and pesticides are stored under safe and sanitary conditions.	<u>(S) Substantially Met</u> S P N NA	

3. Physical Environment: The facility provides a functional, aesthetically pleasing, sanitary, and comfortable environment for patients, personnel, and visitors.

(A) The facility employs a supervisor of sanitation and sufficiently trained personnel to maintain a safe, clean, and orderly environment.	<u>(S) Substantially Met</u> S P N NA	
(B) The buildings are maintained in a clean, attractive, and comfortable manner.	<u>(S) Substantially Met</u> S P N NA	

(C) Acceptable practices are employed for maintenance and repair of equipment, buildings, and grounds.	<u>(S) Substantially Met</u> S P N NA	
--	--	--

4. Medical Care: There is a comprehensive ambulatory medical care program designed to meet the needs of domiciliary patients.

(A) The facility ensures the provision of professional medical services for the patients.	<u>(S) Substantially Met</u> S P N NA	
(B) Each patient has primary physician responsible for the patient's medical care.	<u>(S) Substantially Met</u> S P N NA	
(C) Patients are classified according to domiciliary care required.	<u>(S) Substantially Met</u> S P N NA	
(D) A patient treatment plan is established and maintained for each domiciliary patient.	<u>(S) Substantially Met</u> S P N NA	
(E) Primary care medical services are provided for domiciliary patients as needed.	<u>(S) Substantially Met</u> S P N NA	
(F) Each patient has a complete medical re-evaluation annually and as needed.	<u>(S) Substantially Met</u> S P N NA	

(G) There is provision made for preventive and maintenance dental and other health services.	<u>(S) Substantially Met</u> S P N NA	
(H) Transportation is available for patients needing medical, dental and other health services.	<u>(S) Substantially Met</u> S P N NA	
(I) Domiciliary patients are admitted to an infirmary when necessary.	<u>(N/A) Not Applicable</u> S P N NA	
(J) There is a written agreement with one or more hospitals to accept a patient requiring hospitalization.	<u>(S) Substantially Met</u> S P N NA	
(K) Domiciliary patients are admitted to nursing home care or hospital care if medically necessary.	<u>(S) Substantially Met</u> S P N NA	

5. Nursing Care: The facility maintains an organized nursing service with nursing personnel qualified to meet the nursing care needs of the domiciliary patient.

(A) A full-time qualified registered nurse is responsible for the nursing services provided the patients.	<u>(S) Substantially Met</u> S P N NA	
(B) Primary care nursing services are provided for domiciliary patients.	<u>(S) Substantially Met</u> S P N NA	

(C) Nursing services rendered are documented in the patient's medical record.	(S) Substantially Met S P N NA	
(D) Nursing service participates in the establishment and maintenance of a treatment plan for each domiciliary patient.	(S) Substantially Met S P N NA	
(E) The facility provides for 24-hour nursing services as required to meet the nursing care needs of the domiciliary patients.	(S) Substantially Met S P N NA	

6. Rehabilitation: Rehabilitation services are provided as needed to improve and maintain maximum functioning of each domiciliary patient.

(A) The facility provides, or arranges for under a written agreement, rehabilitation services as needed by the patients.	(S) Substantially Met S P N NA	
(B) Rehabilitation services are provided under a written plan of care for each patient.	(S) Substantially Met S P N NA	
(C) Specialized rehabilitation therapy rendered, progress notes, and evaluation of the treatment plan are recorded in the patient's medical record.	(S) Substantially Met S P N NA	

7. Social Services: The facility provides professional social work services to identify and meet the social and emotional needs of patients.

(A) A qualified social worker is on staff or the facility has a written agreement with a qualified social worker or recognized social agency for consultation on a regularly scheduled basis.	(S) Substantially Met S P N NA	
---	-----------------------------------	--

(B) A written psychosocial assessment is maintained in each patient's medical record.	<u>(S) Substantially Met</u> S P N NA	
(C) Results of social services rendered are documented in the patient's medical record.	<u>(S) Substantially Met</u> S P N NA	
(D) The facility has an organized procedure for discharge and transfers.	<u>(S) Substantially Met</u> S P N NA	

8. Dietetics: The facility provides a dietetic service that meets the daily nutritional needs of patients and ensures that special dietary needs are met.

(A) The dietetic service is under the direction of a qualified dietitian or a full-time dietetic service supervisor with consultation from a qualified dietitian.	<u>(S) Substantially Met</u> S P N NA	
(B) Menus, to the extent medically possible, are planned in accordance with the Recommended Dietary Allowances (RDA) of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	<u>(S) Substantially Met</u> S P N NA	
(C) Special diets are available as needed	<u>(S) Substantially Met</u> S P N NA	
(D) At least three or more regular meals are served daily, with not more than a 14-hour span between substantial evening meal and breakfast.	<u>(S) Substantially Met</u> S P N NA	

(E) Dietetic service personnel practice safe and sanitary food handling techniques.	<u>(P) Partially Met</u> S P N NA	During tour of kitchen on 3/28, food service staff member was observed improper hand washing technique during food preparation on 2 occasions. Staff member did not follow proper sanitation procedure by immersing hands under water only 4 seconds or less, as well as failing to use a paper towel to turn off faucet handles. This sanitation issue was also cited in the facilities most recent State Department of Health Survey report.
(F) Dining areas are large enough to accommodate all domiciliary patients.	<u>(S) Substantially Met</u> S P N NA	
(G) The nutritional status of each patient is monitored on a regular basis.	<u>(S) Substantially Met</u> S P N NA	

9. Patient Activities: An activities program is available to the domiciliary patients and designed to enhance each patient's sense of physical, psychosocial, and spiritual well being.

(A) A member of the facility's staff is designated as responsible for the patient activities program.	<u>(S) Substantially Met</u> S P N NA	
B) Space, equipment, and supplies for the activities program are adequate for individual and/or group activities.	<u>(S) Substantially Met</u> S P N NA	
(C) There are regularly scheduled activities during weekdays, evenings and weekends.	<u>(S) Substantially Met</u> S P N NA	
(D) Each patient's activity plan is a part of the overall treatment plan.	<u>(S) Substantially Met</u> S P N NA	

(E) Religious services and spiritual activities are provided for patients.	<u>(S) Substantially Met</u> S P N NA	
(F) Domiciliary patients are encouraged to participate in supervised community activities.	<u>(S) Substantially Met</u> S P N NA	

10. Pharmacy: Pharmaceutical services meet the needs of patients and are provided in accordance with ethical and professional practices and legal requirements.

(A) A registered pharmacist is responsible for pharmacy services.	<u>(S) Substantially Met</u> S P N NA	
(B) A program is established for the safe procurement, control, and distribution of drugs.	<u>(S) Substantially Met</u> S P N NA	
(C) There is controlled access to all drugs and substances used for treatment.	<u>(S) Substantially Met</u> S P N NA	
(D) Patients on self-medication are instructed by qualified personnel on the proper use of drugs.	<u>(S) Substantially Met</u> S P N NA	
(E) Provision is made for qualified nursing personnel to administer medication to patients who are not in a self-medication program.	<u>(S) Substantially Met</u> S P N NA	

(F) There is an established system for monitoring the outcome of drug therapy or treatment.	<u>(S) Substantially Met</u> S P N NA	
---	--	--

11. Medical Records: The patient's health status is documented regularly in the medical record in accordance with the treatment plan.

(A) Medical records are completely legible and accurately documented, readily accessible, and systematically organized to facilitate retrieving and compiling information.	<u>(S) Substantially Met</u> S P N NA	
(B) The facility safeguards medical record information against loss, destruction, or unauthorized use.	<u>(S) Substantially Met</u> S P N NA	
(C) The medical record contains sufficient information to clearly identify the patient.	<u>(S) Substantially Met</u> S P N NA	

12. Quality Assistance: The facility has an active quality assurance program in the domiciliary to ensure effective utilization and delivery of patient care services.

(A) A member of the facility's staff or facility committee is designated as responsible for coordinating the quality assurance program.	<u>(S) Substantially Met</u> S P N NA	
(B) The quality assurance program encompasses reviews of all services and programs provided for the domiciliary patients.	<u>(S) Substantially Met</u> S P N NA	
(C) The quality assurance program encompasses ongoing utilization review.	<u>(S) Substantially Met</u> S P N NA	

(D) The quality assurance program is reevaluated at least annually.	<u>(S) Substantially Met</u> S P N NA	
---	--	--

13. Quality of Life: The domiciliary level of care fosters a quality of life conducive to self esteem, security, and personal growth.

(A) Patients are treated with respect and dignity.	<u>(S) Substantially Met</u> S P N NA	
(B) There is input to the domiciliary program through a patient advisory council.	<u>(S) Substantially Met</u> S P N NA	
(C) A home like environment is provided.	<u>(S) Substantially Met</u> S P N NA	
(D) The facility has written policies and procedures concerning the rights and responsibilities of the domiciliary patient.	<u>(S) Substantially Met</u> S P N NA	
(E) Patients are oriented to the policies and procedures of the domiciliary on admission.	<u>(S) Substantially Met</u> S P N NA	
(F) Patients may manage personal financial affairs or are given an accounting as required by state law, of financial transactions made on their behalf.	<u>(S) Substantially Met</u> S P N NA	